



HEALTH DEPARTMENT

9 School St. - Amesbury, MA 01913
Tel. 978.388.8134 / Fax 978.388.7874

www.amesburyma.gov

John W. Morris, Health Director

Donna Lickteig, Adm. Asst.

APPLICATION TO OPERATE A SEMI-PUBLIC SWIMMING POOL

Fee Due: \$150.00

Application is hereby made for a permit to operate a public, semi-public or wading pool. This pool is to be operated according to the minimum standards for swimming pools set forth in Article VI of the Sanitary Code of the Commonwealth of Massachusetts and 105 CMR 435.000.

YOU MUST INCLUDE A SCHEMATIC WITH SPECIFICATIONS FOR YOUR POOL WITH THIS APPLICATION.

Location: _____

Owner: _____

Tel.: _____ Cell: _____ Email: _____

Contact Person: _____

Tel.: _____ Cell: _____ Email: _____

Certified Pool Operator: _____

Tel.: _____ Cell: _____ Email: _____

GENERAL

Type of Pool _____ Length _____ Width _____ Volume _____

Average Flow Meter Rate _____ Rate of Turnover _____ Source of Water _____

Disposal of Wastewater _____

SIZE

Swimming Area (sq. ft.) _____ Non-swimming Area (sq. ft.) _____

Diving Area _____ Max. Capacity of People _____

TREATMENT

Treatment System (filter, etc.) _____

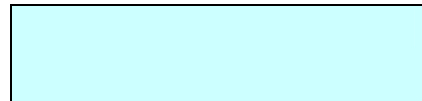
Disinfecting Method _____ Chlorinator Type _____ Chlorinator Capacity (lb.) _____

Chemical Feeders _____ Quantity of Chemical Feeders _____

OTHER

Fence Height _____ Type / Width of Decking _____

Office Use Only – Received



ADM. ASST. HOURS:

Mon. thru Wed.: 8:00 am – 4:00 pm

Thursday: 8:00 am – 7:00 pm

Friday: 8:00 am – 12 Noon

DIRECTOR IN-OFFICE HOURS:

Mon. & Wed.: 8:00 am – 10:30 am

Thursday: 4:00 pm – 7:00 pm

Friday: 8:00 am – 10:30 am

OTHER HOURS BY APPT.

CLOSED DAILY FROM 12:00 pm – 1:00 pm

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